



1745
FW

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/810,962
	Filing Date	March 16, 2001
	First Named Inventor	Atsuo Omaru et al.
	Group Art Unit	1745
	Examiner Name	Tracey Mae Dove
	Attorney Docket Number	09792909-4809
Total Number of Pages in This Submission		

ENCLOSURES (check all that apply)						
<input checked="" type="checkbox"/> Transmitted herewith is Amendment C.						
<input checked="" type="checkbox"/> The fee has been calculated as shown below:						
(1) FOR	(2) CLAIMS REMAINING AFTER AMENDMENT	(3)	(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	(6) RATE	(7) ADDITIONAL FEE
TOTAL CLAIMS	4	-	46	0	<input type="checkbox"/> x \$9.00 <input type="checkbox"/> x \$18.00	\$0
INDEPENDENT CLAIMS	4	-	8	0	<input type="checkbox"/> x \$42.00 <input type="checkbox"/> x \$84.00	\$0
	APPLICATION AMENDED TO CONTAIN ANY MULTIPLE DEPENDENT CLAIMS NOT PREVIOUSLY PAID FOR.			<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	<input type="checkbox"/> x \$140.00 <input type="checkbox"/> x \$280.00 ONE TIME	\$0
	TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0
<input checked="" type="checkbox"/> Applicant petitions the Commissioner for Patents to extend the time for responding to the Office Action dated <u>May 18, 2005</u> by <u>3</u> month(s) for a fee of <u>\$1020.00</u> so that the period for response is extended to <u>November 18, 2005</u> under 37 C.F.R. § 1.321.						
<input type="checkbox"/> The amount of \$_____ for the Terminal Disclaimer under 37 C.F.R. § 1.321 is included in the enclosed check.						
<input type="checkbox"/> The amount of \$_____ for the Amendment under 37 C.F.R. § 1.312(b) is included in the enclosed check.						
<input checked="" type="checkbox"/> The enclosed credit card payment form to charge the amount of <u>\$1020.00</u> covers the extension and claim fees.						
<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees which may be required, or to credit any overpayment to Account No. 19-3140. A duplicate of this sheet is enclosed.						
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT						
14. <input checked="" type="checkbox"/> Customer No. 26263						
Dated: <u>November 18, 2005</u>				 William J. Reyes, (Registration No. 54,218)		

CERTIFICATE OF FACSIMILE	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date indicated below.	
Dated: <u>November 18, 2005</u>	 Roxanne M. Swartz